

# ***Teaching and Learning to Care: Training for Caregivers in Long Term Care***

## ***TLC for LTC***

### **Module Four**



### **When the Mind Falters: Cognitive Losses in Dementia**

*by*

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<b>Name</b>	<b>Appearing as</b>
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Bonnie Haeberle.....	Nurse
Eloise Hicks.....	Mrs. Adams, resident
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## Introduction

### Why This Module?

Dementia, and the cognitive losses and behavioral changes it causes, presents major challenges to nursing home staff. With an improved understanding of how cognition becomes impaired and the stages of dementia, direct care staff can better assess residents' abilities and issues, and respond to them appropriately. The loss of mental function and behavioral changes caused by dementia are frequent reasons for nursing home admission. As a result, up to two-thirds of nursing home residents have dementia, most of whom have Alzheimer's disease, the most prevalent type of dementia. An estimated 5.2 million Americans currently have Alzheimer's disease, and, as the number of older Americans grows rapidly, the prevalence Alzheimer's disease is expected to nearly triple by 2050. Understanding how to care for those with dementia can improve their quality of life and prevent unnecessary decline in their functioning.

### What is the content?

Key content for you to teach in this module includes:

#### 1. The Early, Middle and Late Stages of Dementia

##### EARLY STAGES:

People show signs of forgetfulness, confusion, word-finding difficulty, repetition, and/or poor problem-solving.

People need supervision for instrumental activities of daily living (IADLs) e.g., household management.

##### MIDDLE STAGES:

People show signs of poor recent and remote memory, disorientation, difficulty speaking full sentences, inability to recognize familiar people, and/or difficulty manipulating objects.

People need assistance to perform basic activities of daily living (BADLs) e.g., personal care.

Behavioral problems are common.

##### LATE STAGES:

People show signs of difficulty speaking, walking, sitting up, and/or eating.

People need assistance in all ADLs; progression to total care.



2. The cognitive problem dementia causes:

- Use of language or aphasia.
- Visual-spatial function or perceptual confusion
- Recognition or agnosia
- Motor coordination or apraxia
- Performing sequential tasks or executive dysfunction

The technical terms are included because staff may hear them and will be able to recognize them. They are not expected to learn them.

3. Why and how to recognize disabilities and residual abilities: Disabilities need compensation; residual abilities should be supported.

4. Why periodic assessments are important: To detect changes in the affected person's needs and any reversible declines.

